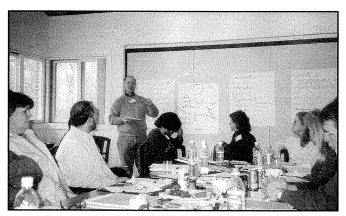
CHEALTHY SCHOOLS! HEALTHY KIDS! CHOOLS! HEALTHY KIDS! HEALTHY KIDS! HEALTHY KIDS!

RI DEPARTMENT OF EDUCATION / RI DEPARTMENT OF HEALTH

VOLUME 7 • NUMBER 1 • FALL / WINTER 2001

Rhode Island Character Education Partnership (RICEP) A Pictorial Year in Review

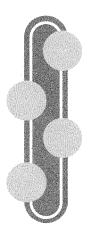
BUILDING LEARNING COMMUNITIES TO DEVELOP SAFE, HEALTHY AND NURTURING SCHOOLS FOR ALL KIDS A YEAR OF PLANNING FOR SOCIAL EMOTIONAL LEARNING (SEL) AND CHARACTER EDUCATION (CE) IN RI



Advisory Council 1st Annual Retreat: Understanding and Practicing SEL & CE

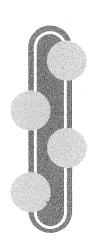


1st Annual Conference: The SEL & CE Connection





1st Annual Summer Institute: SEL & CE Principles and Practices





COVERING KIDS RHODE ISLAND: PAWTUCKET

Research indicates that healthy children are more likely to perform better in school. When children receive the health care necessary for their growth and development, they are better prepared to succeed in school. In this context, the goal of the Covering Kids Rhode Island site in Pawtucket is to link children's health insurance outreach with activities in the Pawtucket School Department. Covering Kids RI is part of a national health access initiative for low-income children sponsored by the Robert Wood Johnson Foundation that receives additional funding support from the Rhode Island Foundation. The lead agency for Covering Kids RI is Rhode Island KIDS COUNT.

Since December of 1999, the following schoolbased outreach activities have been implemented to identify and enroll eligible children in RIte Care, Rhode Island's Medicaid managed care program:

KINDERGARTEN REGISTRATION

The booklet given to families registering their kindergartners now includes a form for parents to complete if they would like to receive more information about RIte Care. Once the forms are returned, followup is provided to those families who have requested more information.

PARENT INFORMATION HANDBOOK

The Parent Information Handbook provides essential information to parents every year about different programs offered in the school, as well as school

policies. A question about the health insurance status of each child attending school was placed in the handbook. Once parents return the form, the Covering Kids coordinator provides follows up.

SCHOOL-BASED HEALTH CENTERS

There are currently two school-based health centers within the Pawtucket School District. When a student visits the school-based health center they are asked about their insurance status. If they are uninsured a packet of information is mailed to the parents. The packet includes information about RIte Care eligibility, a RIte Care application and a list of where the family can go to receive assistance with the application.

SCHOOL-LUNCH/RITE CARE COORDINATION

Covering Kids RI was one of three states in the nation chosen to receive technical assistance from the Center on Budget and Policy Priorities on utilizing the school-lunch application as a tool to enroll families in RIte Care. In Fall 2001 schools in five pilot communities (Pawtucket, Central Falls, North Kingstown, Woonsocket and Newport) will receive a revised schoollunch application which will contain a question regarding health insurance benefits. Designated persons in each of the pilot communities will follow-up with those families who request more information.

If you would like more information please contact Dorothy Stamper, Covering Kids RI Project Director at 401-351-9400 or dstamper@rikidscount.org.

Comprehensive School Health Program: Linda Nightingale Greenwood, Manager, RIDE Beatriz Perez, Manager, RIDOH

School Health Chronicle: Wendy Nilsson, Guest Editor

STAFF:

RI Department of Education Jackie Ascrizzi · Marcia Campbell Kathy Kendall

RI Department of Health Rosemary Reilly-Chammat

Healthy Schools! Healthy Kids! Comprehensive School Health Program is a joint initiative of the RI Department of Education and the RI Department of Health, supported by a grant from the Centers for Disease Control and Prevention. For information about Healthy Schools! Healthy Kids! contact:

RI Department of Education 255 Westminster Street Providence, RI 02903 (401) 222-3037 Hearing/Speech Impaired: (800) 745-5555 (Relay RI/TTY)

RI Department of Health 3 Capitol Hill, Room 408 Providence, RI 02908 (401) 222-3442

Rhode Island Association for Health, Physical Education, Recreation, and Dance Professionals (RIAHPERD) 75th Annual Fall Conference

> Friday, October 26, 2001 Community College of Rhode Island Flanagan Campus Field House, Lincoln, RI

contact: Robin Kirkwood Auld 456-8880



CAN WE TALK?

-Jackie Harrington, RIDE

"Can We Talk?" a four part parent workshop series, promotes parent-child conversations about issues of growing up healthy. It focuses on increasing self-esteem, discussing issues around puberty and sexuality, responding positively to peer pressure and reacting thoughtfully to the mixed messages that are part of the daily lives of young people grades 4-8.

The National **Education Association Health** Information Network (NEA HIN) sponsored the development of the materials and the training as part of its mission to encourage parents to promote healthy families and ensure that students gain the information and skills to be healthy and high achieving. The Center for Disease Control and Prevention. Division of Adolescent and School Health, provided the funding for the parent-training package. Together, CDC and NEA are encouraging states to make the program available. NEA is providing funding for training of up to 140 trainers, materials and supplies for groups of parents being trained during the first year of implementation, and some financial support for a consultant to oversee the development of the program. The list of potential community resources will be developed

with input from the RI "Can We Talk?" Advisory Group and the organizations that they represent. It will be inclusive and ever expanding.

The program has a pre-post survey and there has been one long-term evaluation; data from that is being analyzed. Rhode Island is very involved with developing and implementing the process and outcome evaluation for the training of trainers and for the workshop series. The RI "Can We Talk?" Advisory Group has already begun to develop criteria for trainers and will be encouraging the trainers to work in groups of two (a professional and a parent). It will therefore be able to address the quality and consistency of the sessions. Because RI is a small state it will be possible to evaluate the long-term outcomes, make program modifications and update trainers as needed.

The training is available in both English and Spanish. Trainers will include representatives of diverse ethnicities and organizations. For more information, contact the Rhode Island Department of Education HS! HK! at 222-4600 ext. 2366.

Character Education- A Parent's Perspective

-Joan McKeon, Johnston Parent

Let me first start by saying I am very honored to sit on the Johnston Advisory Committee to develop and implement character education in our schools. As a parent, I feel character development is very important to not only our students but to the entire school staff.

Having been involved in the public school system for the last 6 years, I think it's very important to educate students, staff and administration, on good characteristics (i.e., consideration, kindness, fairness, being polite, etiquette, etc.). If we start now, at an early age, our children will benefit and grow up to be successful in all they do. As adults, we need to set examples and model positive character traits because, if we don't, how can we expect our children/students to "practice what we preach"? I believe all children and adults have good qualities and they just need help bringing them out and learning how to control their emotions.

If we start in kindergarten reinforcing positive character traits and social and emotional skills, can you imagine how great our children will be when they are seniors graduating from high school? What a wonderful group of adults they will be. Starting at this early age will only benefit our world! Remember, we are teaching our children all the time by what we are saying, doing, and how we are acting. Character development will be an educational experience for the entire community. As we all know, every day of our life is a learning experience. Let's make it a positive one in every way.

This will not only involve the students, staff and administration but parents as well because we all need to be reminded of consideration and kindness to each other. I am very fortunate to be involved in this effort and to be learning from the students that are on this committee. To hear their thoughts, feelings and ideas is very exciting and gives me such insight. This is something we all need to be involved in.



The Rhode Island Character Education Partnership Wendy Nilsson, RI Character Education Partnership

I recently received this request from a national electronic work group for Social and **Emotional Learning** and Character Education:

I am working with a family whose son, age 11 years, has a learning disability and recently has fallen into depression, recognizing his own abilities and limitations. The school has been extremely supportive of the family, and the young man is seeing the school social worker. Similar to news reports of children, who commit violence, this child is a victim of ridicule and bullying, and feels friendless. The family is obviously aware there is a problem and is concerned that they should be doing more to help their son. Is seeing the school social worker enough support? They asked if they should be seeking out other mental health professionals, and if so, how do they go about finding and choosing a mental health professional for their child?

Schools across the nation struggle with questions whose answers can be found in social emotional learning programs. What does the school stand for? What is appropriate behavior for students at each grade level? What constitutes bullying? When is it child's play? When is it harassment? When and what can adults in the building do to intervene? Or better yet, what can the adults in the building do to create an environment of caring and belonging so that children will not need to be victims or bullies?

The culture of the school has to support a community of respect and belonging. It must teach students, either explicitly or implicitly, the skills to promote friendship, tolerance, and cooperation -- among many others. If these skills are not modeled, taught or reinforced, students learn that it is acceptable to ostracize a fellow student -- the ramifications of which we are all far too familiar in newspaper headlines across the nation.

In Rhode Island, we too have been struggling with the same questions. As a result of our efforts to provide answers, a partnership evolved from the work of the RI School Health Advisory Council: Healthy Schools! Healthy Kids! children's mental health work group. This group recognized that children's mental health was a component of comprehensive school health that could be supported through character education. In the spring of 2000, this group sought funding from a US Department of Education competitive grant to provide RI schools with support to strengthen students' social and emotional competencies, and support character development.

Currently, the RI Departments of

Education and Health, Healthy Schools! Healthy Kids! initiative, is partnering with the Westerly, Pawtucket, and Providence school districts to pilot a character education (CE) program. The district of Johnston has joined the partnership with its own resources. The foundation of this program is built on the principles of social and emotional learning (SEL) and incorporates current state and local reform efforts. The goal of this partnership is to help RI students achieve high academic performance in a safe, healthy, and nurturing environment.

There are so many resources available to teachers to help them create classrooms, and schools that are free of exclusion. These will be places where students stand up for one another and can participate in the activities of belonging, learning, and being children. I encourage any school interested in addressing the issues introduced in the query to explore developing Character Education and Social Emotional Learning initiatives. The following sites include many resources for immediate and long-range implementation. To learn more about the Rhode Island Character Education Partnership, including opportunities for professional development and community building, please visit us on the web at www.ridoe.net (Character Education).

> www.casel.org. www.bu.edu/education/caec www.esrnational.org www.responsiveclassroom.org www.character.org www.facinghistory.org www.csee.net www.TeachingTolerance.org

ENERGIZING NEWS FROM KIDS FIRST

RIDE has just been awarded the 2001 Team Nutrition Training Grant (\$199,325), its seventh consecutive TNT Grant! This means that the Team Nutrition Programs at Kids First will continue to grow and flourish through the 2001-2002 school year.

Call Kids First @ 751-4503 to find out about what programs are available for your school or childcare center. Some new offerings include: on-site nutrition education workshops for child care staff; "Aim for Fitness," a program which partners Team Nutrition-trained Physical Activity Professionals with schools to help kids "get moving;" technical assistance for the development of local Health Expos; and expansion of the "Healthy Eating From the Ground Up" gardening program to new schools and districts. Stay tuned... as Kids First serves up nutrition, physical activity, and food safety education daily throughout Rhode Island's school and child care communities. Check out the website, especially the "News and Events" section, for the most up-to-date information @ www.kidsfirstri.org.



A Bond Crossing State Lines A Boston School's Perspective on RI's Summer Institute on Character Education

Theresa Brophy, M.A.T., & Hilary Crane-Stern, Boston Community Middle School Meg Smith, LICSW, The Home for Little Wanderers

What could be more professionally appealing than spending two days at a conference in Rhode Island that supports and celebrates what we believe to be a crucial piece of a strong foundation in education---character education and social emotional learning? As directors/educators and a licensed social worker, we were energized by the passion and drive of both workshop leaders and participants in Rhode Island Character Education Partnership's Summer Institute that took place on the University of Rhode Island campus on June 27th and 28th. It was an unparalleled experience, to have administrators, educators, community members and high school students collaborating as one team in exploring the avenues of educational philosophies, skill building, problem solving, active listening, hands-on activities, self-reflection, and sharing of professional challenges.

Clearly the commitment to character education in Rhode Island public schools had already been established in previous outreach and trainings. The participants who were at the conference came prepared to continue implementation in their

respective schools and of providing language and discussion on existing best practices. Day One of the seminar consisted of "hitting the ground running" as attendees completed written, verbal, and bodily kinisthetic methods of self assessment, (*i.e. where they as individuals and their schools stand in the process.) For example, one activity consisted of participants responding to a series of questions by moving physically on a line from "agree" to "disagree" with questions surrounding individual educational beliefs and the implementation of character education at their school or in their district. In this way, we viewed a variety of levels and strategies which sparked self assessment and provided trainers/leaders with information to meet participants where they were. Day Two kept up the pace providing more opportunities for perspective taking and awareness of self and others. The workshop flowed naturally as seeds were planted and relationships among individuals were blossoming.

It was an eye-opening and educational experience for the three of us. As staff of an alternative middle school program in Boston servicing youth between the ages of 12 and 16 who are at risk of failing or dropping out of Boston Public Schools, our entire community of lifelong learners is based on what we call our Human Dignity Policy. As part of a Life Skills class, the purpose of the human dignity course is to improve understanding between students and staff, to promote diversity and to embrace our differences. We work closely with Facing History and Ourselves to create our curriculum. Human Dignity transcends all of the classes at our program. Our mission is to provide a safe space to share our differences and to celebrate them. We have found that when students feel safe they are able to learn.

The summer institute has given us the tools and resources necessary to proceed and develop our work with inner city youth. Under the guidance of Wendy Nilsson, Character Education Liaison of RICEP, who was once our Program Manager, we have begun to expand our knowledge base of character education and to complement our teaching strategies and philosophies with language and support of others. It was inspirational to meet and share experiences with Rhode Island educators and to witness that what we practice in our close-knit community is being spread across the entire state of Rhode Island.

The day was enlightening. The excitement that initially filled the room and sparked engaging conversation between adults about what is working for them and what they could gain from this workshop on all levels--politically, administratively, and directly in classroom practices was palpable through the end. The culmination of the training left us feeling connected to those with whom we had only spent two days hashing out ideas. What developed was a commencement...a commencement of a bond across town lines, state lines, and professional lines that will continue as we commit ourselves to reaching our youth and to building safe, healthy, and nurturing schools.



RESOURCES FOR HEALTH AND EDUCATION

PROFESSIONAL DEVELOPMENT

The Rhode Island Character Education Partnership Sponsors a number of intensive professional development seminars, conferences, institutes and other forums to promote social emotional learning and character education throughout Rhode Island. Please check our web site www.ridoe.net, for dates and availability. We also have links on our web site to other exciting professional development resources.

The Center for Social and Emotional Education (CSEE)

The 5th Annual Fall Conference Understanding and Preventing Youth Violence: From Bullies to Bullets November 8-9, 2001 For Educators, Counselors and Parents Call 212-817-8215 or visit www.csee.net

NEW AT HS! HK! RESOURCE CENTER

New Resources available for loan from the RIDE Health Resource Center

- 1) The following is a list of titles in the NASPE Assessment Series
- Portfolio Assessment for K-12 Physical Education
- Assessing Motor Skills in Elementary PE
- Assessing Student Responsibility and Teamwork
- Elementary Heart-Health Unit-Lessons and Assessment
- Creating Rubrics for Physical Education
- · Assessment in Games Teaching
- Standards-Based Assessment of Student Learning
- Preservice Professional Portfolio System
- Assessing and Improving Fitness in Elementary PE
- 2) The Health Education Assessment 2000 Interpretation Guide is online. Go to www.ridoe.net, then HS! HK!
- 3) A training will be held on October 17 & 18 for middle and high school teachers of health. For more information call Jackie Harrington @222-4600 X2369.

GRANTS AND FUNDING National Association of Partners in

Education & MetLife Foundation announces the "Teacher-Parent Engagement through Partnerships Award" will be awarded to 6 partnerships. There will be one Grand Prize and five Specialized Awards, one in each of a variety of areas of specialization. http://www.partnersineducation.org/4.ht Philanthropy News Digest-K-12 lists Funding Opportunities with links to grant-seeking for teachers, learning technology, and more.

http://fdncenter.org/pnd/20000328/funding.html

School Grants offeres a collection of resources and tips to help K-12 educators apply for and obtain special grants for a variety of projects. http://www.schoolgrants.org

OTHER RESOURCES

The Surgeon General's Call to Action To Promote Sexual Health and Responsible Sexual Behavior is available at www.surgeongeneral.gov/library/sexual-health/

School-Based Youth Service Centers

presents a new report, "Helping Families to Help Students," looks at the factors that have led to the school-based Centers' remarkable success, including the unusual degree of flexibility they have been given to find solutions that best fit their local communities. http://www.sreb.org/programs/srr/pubs/Helping_Families.asp

The DOH website provides lots of health information relevant to schools from immunization to violence prevention, www.doh.state.ri.us/

The CDC's Division of Adolescent and School Health (DASH) home page provides access to funding opportunities. www.cdc.gov/nccdphp/dash

Kids Walk-to School: A Guide to Promote Walking to School www.cdc.gov/nccdphp/dnpa/kidswalk.htm

Talk to Someone Who Can Help now available in Spanish (2001). American Psychological Association. Call 1-877-274-8787, ext. 135.

Addressing the Problem of Juvenile Bullying (2001). Office of Juvenile Justice and Delinquency Prevention http://www.ncjrs.org/txtfiles1/ojjdp/fs20 0127.txt

School Violence, Creating Safe Schools, Conflict Resolution Education (2001). Juvenile Justice Journal, 8(1). http://ojjdp.ncjrs.org/pubs/general.html#j jjournal

COMPREHENSIVE SCHOOL HEALTH PROGRAM LIVING EXAMPLE SCHOOLS

Byfield School, Bristol - by Mary Lero We hope this will be the start of a fabulous year of school goals focused on comprehensive school health. Our living example school started off the year with a Wellness Team Building Workshop presented to us by Team Nutrition staff. We have chosen to work on Family and Community Involvement, Nutrition and School Climate this first year. We began the year with a family social to meet the staff and families on the eve of the first day of school. The kindergarten parents were treated to a breakfast on the first day of school. The parent leaders introduced them to the school and encouraged parents to join working committees. We will be promoting healthy snacks in the classrooms, lunchroom, and at family social events, by examining what is offered now and selecting alternatives if necessary. We have the support of our food service staff in this endeavor.

At a planning meeting during the summer, our staff embraced a code of conduct for our students and staff. We will initiate the Second Step Violence Prevention Program in all grades this fall.

We are presently meeting with staff from Roger Williams University to develop a service connection with our students at Byfield School. We are looking for a Big Brother type model for some of our students. We hope to continue our very successful after school enrichment program next year. This year we had 75% of the student participate in this program.

B.F. Norton School, Cumberland Through its involvement with the Comprehensive School Health (CSH) pilot program, B.F. Norton has been able to focus and coordinate many healthy activities. The PTA arranged for an expansion of the school playground to incorporate many ideas for agility training from the physical education staff. Basketball hoops were also installed. The parent group funded many after school programs such as karate, basketball and acrobatics for the students. A workshop series incorporating healthy ideas as well as children's growth and development into reading, writing mathematics, science instruction for parents is in the planning stages. A full time guidance counselor and support for families is also in the works. Thanks to the support from the CSH staff from RIDE and DOH, healthy things are happening at B.F. Norton.



Message from the Guest Editor

On the one-year anniversary of the Rhode Island Character Education Partnership, I am thrilled to be the guest co-editor of the School Health Chronicle. As the state's Character Education Liaison, I am excited to have an opportunity to share the innovative things happening in schools throughout RI that support effective Character Education and Social Emotional Learning, but may not necessarily be labeled as such.

In the same way that RI schools promote physical health, because they understand it will enhance academic achievement, they are also paying closer attention to improving ways to support the social and emotional health of students. Schools throughout the state are accomplishing this task by providing teachers with professional development opportunities that encourage teams to transform schools into communities that foster social emotional literacy and character development.

This edition of the Chronicle is an opportunity to broaden the scope and network of families, students, community partners and educators who are using the affective side of education to create safe, healthy and nurturing schools. For those who are not currently engaged in SEL/CE efforts, we hope to introduce you to a vast network of people and schools who are committed to SEL/CE.

I hope you will respond to the "Call For Ideas" to further develop the resources for Character Education in Rhode Island.

The Rhode Island Character Education Partnership distributes its own newsletter that features classroom and district efforts to support character development though social and emotional learning. Look for the next edition in January, 2002.

The staff of the Chronicle welcomes your questions, comments and feedback.

HS!HK! Award Recipients 2001

The Departments of Education and Health hosted the 4th Annual Healthy Schools! Healthy Kids! Recognition Awards on May 25th, 2001 at the State House. Congratulations to all the recipients who promoted coordinated school health programs in exemplary and innovative ways. This year, the three Living Example Schools, (see article in this Chronicle) received the HS!HK! Special Recognition Award for working toward creating schools that exemplify comprehensive school health.

LEADERSHIP RECIPIENTS:

Bonnie Braga Miriam Hospital Providence, RI

Bev Hoag Toll Gate High School Warwick, RI

Ruth Barge Thumbtzen Thompson Middle School Newport, RI

LEADERSHIP HONOR ROLL:

Vanessa Benway Portsmouth Middle School Portsmouth, RI

William Eyman Rhode Island Department of Education

Judith Frank Lincoln Central Elementary School Lincoln, RI

Health and Physical Education Departments Barrington High School Barrington, RI

Valerie Jacavone Brown Avenue School Johnston, RI

Dr. Michael Jolin, Superintendent Johnston School Department Johnston, RI

Bob Kendall Portsmouth Middle School Portsmouth, RI

Mary Ann Lilla Mt. Pleasant High School Providence, RI

Brian McCadden Rhode Island College

Diana McPherson North Smithfield Jr.-Sr. High School North Smithfield, RI

Gail Rubinstein Lillian Feinstein Sackett Street School Providence, RI

Harold Smith McGuire School North Providence, RI Shawna Southern Lillian Feinstein Sackett Street School Providence, RI

Jonathan Stringfellow Riverside Middle School Riverside, RI

Ellen Vermette Steere Farm Elementary School Burrillville, RI

PROGRAM DEVELOPMENT RECIPIENTS:

Tiverton High Peer Helping Network Tiverton High School Tiverton, RI

Healthy Bodies, Healthy Minds Oak Lawn School Cranston, RI

T.R.A.V.I.S. (Taking Responsibility Against Very Inappropriate Situations)

Colt Andrews School Bristol, RI

PROGRAM DEVELOPMENT **HONOR ROLL**

Aramark Corp. Middletown Public Schools Middletown, RI

Birthday Card Program Colt Andrews School Bristol, RI

Brown Avenue Healthy Kid's Day Brown Avenue School Johnston, RI

The Calorie Club Cranston-Calvert School Newport, RI

Draw a Breath Program Hasbro Children's Hospital Providence, RI

Ground Hog Job Shadow Day Miriam Hospital/Dr. Martin Luther King, Jr. School Providence, RI

Health and Social Service Committee William D'Abate School Providence, RI

Popular Theater of Rhode Island

Moses Brown and Hope High School Providence, RI

Providence Family Van Women & Infants Hospital Providence, RI

EBC Dress Down Day/Stand Toll Gate High School Warwick, RI

SPECIAL RECOGNITION **AWARDS**

Living Example Team Matunuck School Matunuck, RI

Living Example Team B.F. Norton School Cumberland, RI

Living Example Team Byfield School Bristol, RI

STUDENT RECOGNITION **AWARDS**

Rick Messier Peer Helping Network

Robert Brown Peer Helping Network

Brian Cincotta Peer Helping Network

Erin Farias Peer Helping Network

STUDENT RECOGNITION HONOR ROLL

Zoe Hansen-DiBello Urban League of Rhode Island

Nicholas Jackson Urban League of Rhode Island

Jeffrey Gauvin Exeter-West Greenwich High School

Wendy Nilsson



Are High-School Students in RI at Risk for Suicide? What Schools Need to Know By Deborah Stone, MSW, MPH, Violence Prevention Program, RI Department of Health

Suicidal behavior in adolescents is a pressing health problem that needs to be addressed by schools. Approximately 2,000 adolescents complete suicide each year in the United States, with the incidence of suicide attempts peaking in mid-adolescence. Nationwide, suicide is the third leading cause of death for people ages 15-24. In RI, during the period 1994-1998, suicide was the second leading cause of death for this age group (Office of Health Statistics, Department of Health). So what are the causes of suicide, and what role do schools play in its prevention?

According to researchers Conwell and Brench, nine out of ten adolescents who complete suicide suffer from mental illness, such as depression or anxiety disorders at the time of their death. Substance abuse also increases the risk of suicide. These interrelated risks are particularly important for RI youth, families, schools, and the greater community because in the 1999-2000 school year, two-thirds of behavioral health visits to the state's school-based health centers were for mood or anxietyrelated problems.

The U.S. Surgeon General notes those children most at risk for developing a mental disorder include those with

- prenatal damage from drugs, tobacco, and alcohol
- · low birth weight
- living in poverty and/or deprivation
- a history of abuse and neglect, and/or exposure to traumatic events
- · a parent who has a mental health disorder.

The question then is not, "Do students come to school ready to learn?" but rather, "How many students come to school with an undiagnosed mental illness?"

In 1998, 42% of 9th graders and 61% of 12th graders in Rhode Island used alcohol in the previous month, and over 20% used marijuana in the past month. In 2000, 921 juvenile referrals were made to Family Court for drug abuse violations. Additionally, a recent study has linked teen cigarette smoking to depression. How many students smoke cigarettes or use drugs in your school?

What can schools do to help prevent suicide?

The Rhode Island general law (16-21-7) requires that all schools have a school health program providing for a healthy school environment, health education, and services. To help schools comply with the law and to ensure that schools provide quality health education instruction, the Rhode Island Health Education Framework Health Literacy For All Students, was developed for grades K-12. Mental and emotional health is one of the dimensions addressed in the framework, and outlines what schools need to teach to help young people develop feelings of autonomy, positive decision-making skills, and hopefulness for their futures. Schools use the framework to review and update their health education curricula to ensure that students' mental and emotional health needs are being effectively addressed.

According to the National Suicide Prevention Strategy released in Spring 2001, understanding the stigma of mental illness and the importance of seeking help is key to reducing rates of suicide attempts and deaths by suicide.

Schools are mandated to provide teachers with suicide prevention education including how to recognize suicide warning signs in students. The Samaritans of RI (272-4243) provide this education throughout Rhode Island and have a suicide prevention curriculum available. According to the literature, effective school suicide prevention programs are:

- · Integrated into regular school programming
- · Based within a larger framework of mental health promotion and healthy living
- · School-based versus administered one time by an outside agency
- Sustained/on-going
- Focused on both the general student population AND those determined to be at higher risk of suicide
- Supported by all school staff, administrators, and parents
- Proactive in identifying at-risk students, including utilizing self-assessment questionnaires
- Responsible for student referral and follow-up
- Part of a larger school-community prevention strategy
- Written into school policy

Suicide is a complex problem requiring multiple strategies. Adolescents need the support of schools, families, and the community. Let's get started!

For more information on youth suicide prevention, including Rhode Island's suicide prevention planning process (currently working on prevention guidelines for ages 15 - 24) and/or to find out how you can get involved contact Deborah Stone at 222-7635 or check out the violence prevention web site at www.doh.state.ri.us/violenceprevention/vpphome.htm



PHYSICAL EDUCATION AND PHYSICAL ACTIVITY IN RI

By Cheryl Bayuk, Physical Education Specialist, RI Department of Health

Healthy Schools! Healthy Kids!, a joint initiative between HEALTH and RIDE, in cooperationwith RIAH-PERD, the state association for health, physical education, recreation, and dance professionals, is leading the development of physical education standards for K-12 schools. The goal is to create a RI Physical Education Framework, a comprehensive guide for physical educators that provides performance descriptors and assessments, for schools to use beginning in the 2002-2003 school year. This initiative, funded by the U.S. Centers for Disease Control and Prevention (CDC) Division of Adolescent and School Health (DASH), supports the need for increased physical activity (PA), one of the leading health indicators for school aged youth established by CDC.

In 1995, the National Association of Sport and Physical Education (NASPE) developed seven physical education standards. They were intended to be the gold standard for states to use in developing their own standards due to the extensive research and review process used to develop them. Many teachers refer to the NASPE standards when developing curriculum. Over the last few years many states, RI included, have used the NASPE standards as the backbone for state physical education standard development.

In Rhode Island, the first step in developing our standards was to collect information on the availability of Physical Education (PE) in RI schools from all K-12 PE teachers in 330 public schools. The findings identified an important problem with the way children receive PE. Although children have some opportunities each week, PE activities are not provided on a daily basis. RI is below national recommendations. The U.S. Centers for Disease Control and Prevention (CDC) recommends 30 minutes or more of PA on all, or most days of the week, and the National Association of Sport and Physical Education [NASPE] recommends 30 minutes of PE per day for elementary schools and 50 minutes per day for secondary schools.

A committee was formed last February to develop RI-specific PE standards. The committee has representatives from elementary, middle, high schools (both new to the profession and seasoned veterans), as well as PE professors from RIC and URI. The PE Standards Committee is charged with developing the K- 12 physical education content standards specific to the needs of our state, using national NASPE standards as a basis. Rhode Island PE Standards are intended to ensure that each student graduating from high school has the mental and physical capacity for lifelong physical activity. This is accomplished by providing standards and benchmarks

that are sequential, age appropriate, and comprehensive.

The task is far from complete. Our next step is a thorough review process. An open invitation has been issued to teachers, curriculum coordinators, department chairs of health and physical education, and other education professionals, as well as community members (parents, students, pediatricians, school nurses, etc.) to review the committee's draft document and provide input and suggestions. After thorough review, the PE standards document will be presented to the RI Board of Regents for acceptance.

Healthy Schools! Healthy Kids! has received additional funds from CDC this fall to establish a RI Physical Activity Advisory Council. The council will be charged with ensuring that RI is effectively promoting physical activity and physical education to children in order to lower staggering rates of obesity, cancer, and heart disease, conditions exacerbated by physical inactivity. Coordination with CDC's national youth media campaign for children ages 9-13 will be a major focus of the Council's work.

For more information on the Rhode Island Physical Education Standards and/or to find out how you can get involved contact Cheryl Bayuk at CherylB@doh.state.ri.us or 401-222-7634. A RI physical activity web site is coming soon. Watch for details at www.health.state.ri.us.

PROVIDENCE SCHOOL NURSE TEACHERS ON A CENTRAL DATABASE

With the tap of a few keys and the click of a mouse, Providence elementary and middle school nurse teachers can obtain health information on students. This spring, Health & Education Leadership for Providence (H.E.L.P.) in partnership with the Providence School District launched its computerized health card -- the very first system for managing school children's health data on a central database in the state.

The new system allows school nurses to manage students' medical records and health professionals to identify, analyze, and evaluate trends about the health of Providence students. The computerized database also enables nurses to provide accurate and timely records to parents and school health professionals.

This innovative technology tool provides instant analysis of immunization, screenings, high risk factors, and disease histories. The system's security measures, including firewalls and password requirements, protect the confidentiality of records, but enables school nurse teachers to look at key data to inform their practice.

HELP members invested \$100, 000 to support the design and start-up costs of this computerized system. The organization hired 15 data loaders and purchased ten laptops for those nurses who needed computers. For more information, call Monica Smith at H.E.L.P., 461-2314.



STATE LEGISLATURE AWARDS \$525,000 FOR SCHOOL-BASED HEALTH CENTERS

Thanks to the efforts of the RI Assembly on School Based Health Care, and other advocates including students, teachers, parents, administrators, health center staff, health insurers and a variety of community organizations, Rhode Island's seven school-based health centers are open for business this coming school year.

In 1999, Senator Mary Parella established a Special Senate Commission to Study School-Based Health Centers. Legislation was developed requesting \$1,125,000 to sustain the existing seven centers and to expand into two additional schools each year, based on the recommendations in the report. Senator Parella was the primary sponsor of the bill on the Senate side, while Representative Elaine Coderre was the primary sponsor of the bill on the House side. Advocacy efforts included: testimony before the House and Senate finance committees, letter writing, phone calls, legislative visits to the centers, and student delivered testimony to legislative leaders. Ultimately, \$525,000 was budgeted, just enough to keep the existing centers afloat.

This year the centers efforts will include increasing enrollment and utilization of preventive services and analysis of billing practices to ensure that each site is receiving all possible third party billing revenue. For more information about school-based health centers contact Rosemary Reilly-Chammat, RI Department of Health, 222-5922.

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